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10/542112

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

GENERAL POWER OF ATTORNEY

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Owner Name: DE LA RUE INTERNATIONAL, LTD.

hereby appoints the patent practitioners associated with Oliff & Berridge, PLC Customer No. 25944 as attorneys of record to prosecute any and all patents and patent applications in which this General Power of Attorney is filed, and all continuations and divisions thereof, owned in whole or in part by the above-named owner, and to transact all business in the Patent and Trademark Office.

The undersigned is authorized to execute this document as or on behalf of the owner.

ALL CORRESPONDENCE IN CONNECTION WITH THIS APPLICATION
SHOULD BE SENT TO OLIFF & BERRIDGE, PLC, CUSTOMER NO. 25944,
TELEPHONE (703) 836-6400.

23 JULY 2004
Date

Signature

Typed Name: DEREK M. WALLACE.

Title: AUTHORIZED SIGNATORY
(if acting on behalf of an Owner)

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**DECLARATION UNDER 35 USC §371(c)(4) FOR
PCT APPLICATION FOR UNITED STATES PATENT**

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As a below named inventor, I hereby declare that:
 My residence, post office address and citizenship are as stated below under my name;
 I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought, namely the invention entitled: COUNT AND LOGIN MANAGEMENT

described and claimed in international application number PCT/US03/027613 filed September 5, 2003.

I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations §1.56.

Under Title 35, U.S. Code §119, the priority benefits of the following foreign application(s) and/or United States Provisional application(s) filed by me or my legal representatives or assigns within one year prior to my international application are hereby claimed:

U.S. Provisional Application No. 60/408,303 Filed September 6, 2002
 U.S. Provisional Application No. 60/448,484 Filed February 21, 2003
 U.S. Provisional Application No. 60/460,055 Filed April 4, 2003
 U.S. Provisional Application No. 60/460,420 Filed April 7, 2003

The following application(s) for patent or inventor's certificate on this invention were filed in countries foreign to the United States of America either (a) more than one year prior to my international application, or (b) before the filing date of the above-named foreign priority application(s):

ALL CORRESPONDENCE IN CONNECTION WITH THIS APPLICATION SHOULD BE SENT TO OLIFF & BERRIDGE, PLC, CUSTOMER NUMBER 25944, TELEPHONE (703) 836-6400.

I hereby declare that I have reviewed and understand the contents of this Declaration, and that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

1 **Typewritten Full Name of Sole or First Inventor:** Harlan A. HURWITZ
 2 **Inventor's Signature:** [Signature]
 3 **Date of Signature:** 30 2005
 Residence: River Edge New Jersey USA
 City State or Province Country
 Citizenship: USA NJ
 Post Office Address: 9 Irene Court,
 (Insert complete mailing address, including country) River Edge, New Jersey 07661, USA

Note to Inventor: Please sign name on line 2 exactly as it appears in line 1 and insert the actual date of signing on line 3.

IF THERE IS MORE THAN ONE INVENTOR USE PAGE 2 AND PLACE AN "X" HERE ☒
 (Discard this page in a sole inventor application)

10/542112

200

1 **Typewritten Full Name of Joint Inventor:** Stewart A. KAUTSCH
Given Name Middle Initial Family Name

2 **Inventor's Signature:** Stewart A. Kautsch

3 **Date of Signature:** November 17 2005
Month Day Year

Residence: Rutherford New Jersey USA
City State or Province Country

Citizenship: USA NJ

Post Office Address: 113 Feronia Way,
(Insert complete mailing address, including country) Rutherford, New Jersey 07070, USA

1 **Typewritten Full Name of Joint Inventor:** Brendan K. MURPHY
Given Name Middle Initial Family Name

2 **Inventor's Signature:** _____

3 **Date of Signature:** _____
Month Day Year

Residence: Cedar Grove New Jersey USA
City State or Province Country

Citizenship: USA

Post Office Address: 139 Sherman Avenue
(Insert complete mailing address, including country) Cedar Grove, NJ 07009

1 **Typewritten Full Name of Joint Inventor:** Robert PICKLES
Given Name Middle Initial Family Name

2 **Inventor's Signature:** _____

3 **Date of Signature:** _____
Month Day Year

Residence: Chesapeake Virginia USA
City State or Province Country

Citizenship: USA

Post Office Address: 1357 Danielle Court,
(Insert complete mailing address, including country) Chesapeake, Virginia 23320, USA

1 **Typewritten Full Name of Joint Inventor:** Daniel M. WOBSER
Given Name Middle Initial Family Name

2 **Inventor's Signature:** _____

3 **Date of Signature:** _____
Month Day Year

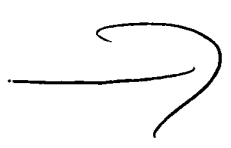
Residence: Jackson New Jersey USA
City State or Province Country

Citizenship: USA

Post Office Address: 935 Woodlane Road,
(Insert complete mailing address, including country) Jackson, New Jersey 08527, USA

Note to Inventor: Please sign name on line 2 exactly as it appears in line 1 and insert the actual date of signing on line 3.

This form may be executed only when attached to the first page of the Declaration and Power of Attorney of the application to which it pertains.



09 DEC 2005

10/542112

1	Typewritten Full Name of Joint Inventor:		
	Stewart	A.	KAUTSCH
	Given Name	Middle Initial	Family Name
2	Inventor's Signature:		
3	Date of Signature:		
	Month	Day	Year
	Residence: Rutherford	New Jersey	USA
	City	State or Province	Country
	Citizenship: USA		
	Post Office Address: 113 Feronia Way,		
	(Insert complete mailing address, including country) Rutherford, New Jersey 07070, USA		

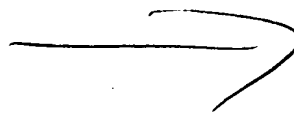
1	Typewritten Full Name of Joint Inventor:	<u>300</u>	<u>Brendan</u>	<u>K</u>	<u>MURPHY</u>
2	Inventor's Signature:	<u>[Signature]</u>	<u>Given Name</u>	<u>Middle Initial</u>	<u>Family Name</u>
3	Date of Signature:	<u>8/6/05</u>	<u>Month</u>	<u>Day</u>	<u>Year</u>
	Residence:	<u>Cedar Grove</u>	<u>New Jersey</u>	<u>USA</u>	
	Citizenship:	<u>USA</u>	<u>City</u>	<u>State or Province</u>	<u>Country</u>
	Post Office Address: (Insert complete mailing address, including country)	<u>139 Sherman Avenue</u> <u>Cedar Grove, NJ 07009</u>			

1	Typewritten Full Name of Joint Inventor:	Robert	PICKLES
		Given Name	Middle Initial
2	Inventor's Signature:		
3	Date of Signature:		
		Month	Day
	Residence:	Chesapeake	Virginia
		City	State or Province
	Citizenship:	USA	Country
	Post Office Address:	1357 Danielle Court,	
	(Insert complete mailing address, including country)	Chesapeake, Virginia 23320, USA	

1	Typewritten Full Name of Joint Inventor:	Daniel	M.	WOBSER
		Given Name	Middle Initial	Family Name
2	Inventor's Signature:			
3	Date of Signature:			
		Month	Day	Year
	Residence:	Jackson	New Jersey	USA
		City	State or Province	Country
	Citizenship:	USA		
	Post Office Address:	935 Woodlane Road,		
	(Insert complete mailing address, including country)	Jackson, New Jersey 08527,USA		

Note to Inventor: Please sign name on line 2 exactly as it appears in line 1 and insert the actual date of signing on line 3.

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1	Typewritten Full Name of Joint Inventor:	Stewart	A.	KAUTSCH
		Given Name	Middle Initial	Family Name
2	Inventor's Signature:			
3	Date of Signature:			
		Month	Day	Year
	Residence:	Rutherford	New Jersey	USA
		City	State or Province	Country
	Citizenship:	USA		
	Post Office Address:	113 Feronia Way,		
	(Insert complete mailing address, including country)	Rutherford, New Jersey 07070, USA		

1	Typewritten Full Name of Joint Inventor:	Brendan	K.	MURPHY
2	Inventor's Signature:	Given Name	Middle Initial	Family Name
3	Date of Signature:	Month	Day	Year
	Residence:	Cedar Grove	New Jersey	USA
	Citizenship:	City	State or Province	Country
	Post Office Address: (Insert complete mailing address, including country)	139 Sherman Avenue Cedar Grove, NJ 07009		

1 **Typewritten Full Name of Joint Inventor:** Robert PICKLES

2 **Inventor's Signature:** [Signature]

3 **Date of Signature:** 11-15-2005

Residence: Chesapeake Virginia USA

Citizenship: USA VA State or Province Country

Post Office Address: 1357 Danielle Court,

(Insert complete mailing address, including country) Chesapeake, Virginia 23320, USA

1	Typewritten Full Name of Joint Inventor:	Daniel	M.	WOBSER
		Given Name	Middle Initial	Family Name
2	Inventor's Signature:			
3	Date of Signature:			
		Month	Day	Year
	Residence:	Jackson	New Jersey	USA
		City	State or Province	Country
	Citizenship:	USA		
	Post Office Address: (Insert complete mailing address, including country)	935 Woodlane Road, Jackson, New Jersey 08527,USA		

Note to Inventor: Please sign name on line 2 exactly as it appears in line 1 and insert the actual date of signing on line 3.

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10/542112

1 **Typewritten Full Name of Joint Inventor:** Stewart A. KAUTSCH
Given Name Middle Initial Family Name

2 **Inventor's Signature:** _____

3 **Date of Signature:** _____
Month Day Year
Residence: Rutherford New Jersey USA
City State or Province Country
Citizenship: USA
Post Office Address: 113 Feronia Way.
(Insert complete mailing address, including country) Rutherford, New Jersey 07070, USA

1 **Typewritten Full Name of Joint Inventor:** Brendan K. MURPHY
Given Name Middle Initial Family Name

2 **Inventor's Signature:** _____

3 **Date of Signature:** _____
Month Day Year
Residence: Cedar Grove New Jersey USA
City State or Province Country
Citizenship: USA
Post Office Address: 139 Sherman Avenue
(Insert complete mailing address, including country) Cedar Grove, NJ 07009

1 **Typewritten Full Name of Joint Inventor:** Robert PICKLES
Given Name Middle Initial Family Name

2 **Inventor's Signature:** _____

3 **Date of Signature:** _____
Month Day Year
Residence: Chesapeake Virginia USA
City State or Province Country
Citizenship: USA
Post Office Address: 1357 Danielle Court,
(Insert complete mailing address, including country) Chesapeake, Virginia 23320, USA

1 **Typewritten Full Name of Joint Inventor:** Daniel M. WOBSER
Given Name Middle Initial Family Name

2 **Inventor's Signature:** [Signature]

3 **Date of Signature:** NOVEMBER 16 2005
Month Day Year
Residence: Jackson New Jersey USA
City State or Province Country
Citizenship: USA NJ
Post Office Address: 935 Woodlanc Road,
(Insert complete mailing address, including country) Jackson, New Jersey 08527, USA

Note to Inventor: Please sign name on line 2 exactly as it appears in line 1 and insert the actual date of signing on line 3.

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